

Thomas O. Forslund, Director

Governor Matthew H. Mead

Policy Title:	Privacy Threshold Analysis and Privacy Impact Assessment
Policy Number:	S-024
Effective Date:	July 1, 2013
Approval:	Thomas 0 Forsland 5/21/13
	Thomas O. Forslund, Director Date

Purpose:

This policy establishes the Wyoming Department of Health's (WDH) responsibility to conduct accurate and thorough assessments of proposed WDH system installations or modifications before such installations or modifications are placed into production.

Scope:

This policy applies to all WDH workforce.

Definitions:

Privacy Threshold Analysis (PTA) is a basic review of a proposed system installation or modification that assesses the need for a Privacy Impact Assessment. If a PTA determines that the installation or modification affects a system that creates, stores, receives, or transmits electronic protected health information (ePHI), then a Privacy Impact Assessment must be completed.

Privacy Impact Assessment (PIA) is a thorough review of a proposed system installation or modification that assesses the risks associated with creating, storing, receiving, or transmitting ePHI and evaluates protections and alternative processes to mitigate the identified risks.

System means a discrete set of information resources organized for the collection, processing, maintenance, use, sharing, dissemination, or disposition of information.

Policy:

1. General

- a. For all proposed WDH system installations or modifications, WDH divisions/programs/facilities and/or workforce shall complete and submit the appropriate assessment, (PTA and/or a PIA), to the WDH Compliance Office for review and approval.
- b. The WDH Compliance Office must review and approve the PTA and/or PIA before any proposed system installation or modification is placed into production.

Procedures:

1. PTA procedures

- a. The relevant WDH division/program/facility and/or workforce completes and submits a PTA to the WDH Compliance Office.
 - i. The PTA template and guidance for completing a PTA are located on the designated WDH privacy and security web page.
- b. The WDH Compliance Office reviews the completed PTA and determines that either:

- i. The PTA constitutes sufficient documentation because the proposed system installation or modification does not create, store, receive or transmit ePHI; or
- ii. A PIA must be completed because the PTA indicates the proposed system installation or modification involves creation, storage, receipt, or transmission of ePHI.
- c. The WDH Compliance Office shall be available to assist the relevant WDH division/program/facility and/or workforce with questions/concerns regarding completion, submission, review, and approval/denial of the PTA.
- d. The WDH Compliance Office shall make best efforts to complete its review within thirty (30) days following receipt of a completed PTA.

2. PIA procedures

- a. The relevant WDH division/program/facility and/or workforce completes and submits a PIA to the WDH Compliance Office.
 - The PIA template and guidance for completing a PIA are located on the designated WDH privacy and security web page.
 - ii. Due to the technical complexity of a PIA, the WDH division/program/facility and/or workforce may choose to collaborate with the vendor supplying the installation or making the modification to complete the PIA.
- b. The WDH Compliance Office reviews the completed PIA and determines that either:
 - i. The PIA is incomplete and requires additional information before it can be reviewed; or
 - ii. The PIA is complete and the proposed system installation or modification:
 - A. Can be placed into production once any relevant agreements (i.e., contract and BAA) are executed; or
 - B. Cannot be placed into production because the risks are too great and the safeguards are inadequate.
- c. The WDH Compliance Office shall be available to assist the relevant division/program/facility and/or workforce with questions/concerns regarding completion, submission, review, and approval/denial of the PIA.
- d. The WDH Compliance Office shall make best efforts to complete its review within thirty (30) days following receipt of a completed PIA.

Contacts:

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Documents and Forms:

PIA Official Guidance PIA Work Plan Privacy Impact Assessment Template Privacy Threshold Analysis Template Why a PIA?

Policies:

S-001a; Risk Analysis and Management

References:

45 CFR § 164.306 45 CFR § 164.308 45 CFR § 164.312 NIST SP-800-18

Training: